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Anxiety Machines: Continuous Connectivity and the New Hysteria

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ANXIETY MACHINES

continuous connectivity and the new hysteria

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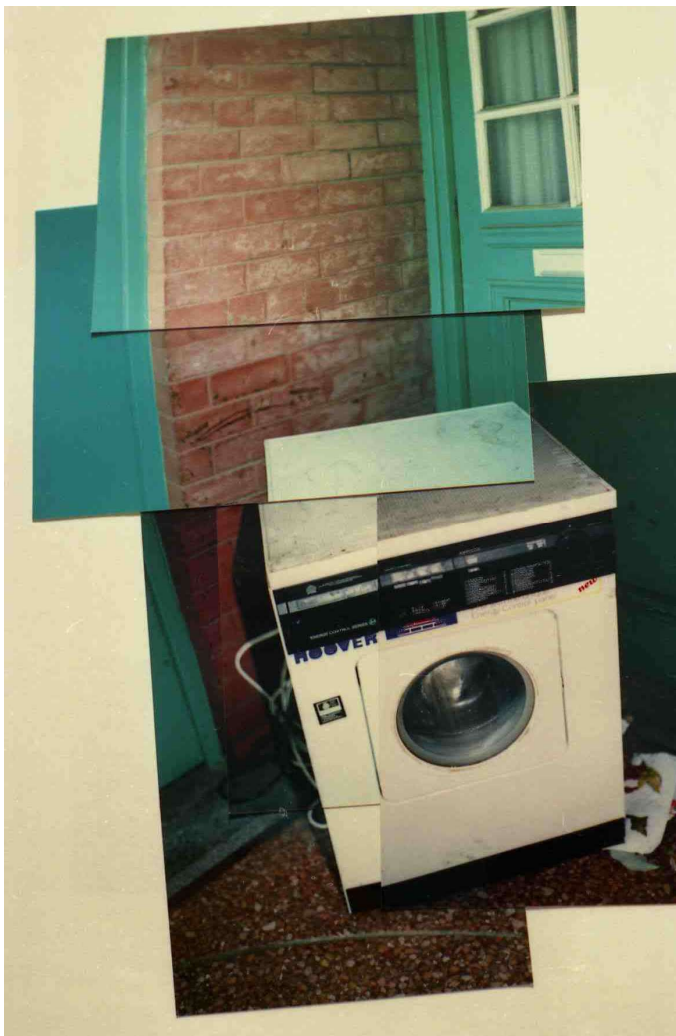


*'The modern individual must work
harder, longer, and with far more distraction in what Virilio calls a "tele-present"
world, where the immaterial workspace can be entered and work begun from
anywhere in the world with telecommunications coverage.'*

Anxiety and melancholia are increasingly the defining experiences of life and labour in the contemporary era. Our limbs and lower backs are tense, tired and overworked; our minds stressed by increasing demands by bosses, friends and lovers to do the impossible: increase our productivity, despite what is produced being less and less necessary. The demand everywhere is the same: do more, do it quicker! Never must we act, think or create *better*. This article connects rising UK and US levels of anxiety disorder to the shift to a neoliberal *economic politic* in these states. Although it is not the first to connect ordinary misery and capitalism, it marries together critical theory and medical research into rising allergies and anxiety disorders to investigate this contemporary condition of anxiety, and how it is engendered not by individuality and the pap of lifestyle magazines, but by a more fundamental insecurity in the average citizen's political and working rights, compounded by the need to remain continuously connected, and hence continuously potentially at work. Psychopharmacology itself, that which records and manages anxiety with its biochemical boons, is the final cause and harbinger of this new hysteria. The intention is not to depress the reader with more bad news that drives us back into labour's distractions, but to bring to light an unexamined mindset of indispensability at the root of anxiety, a drear submission to the inevitability of current conditions, that the worker can abandon. The graveyards of the world are filled with the indispensable. Anxiety machines can disconnect from their travails through desperation, humour, arrogance and cunning.

For some like myself, anxiety and depression are not technical terms but clinical descriptions of personal experiences. I have had fairly severe allergies from the age of 7 up to around 18. In turn, I have experienced depression of varying severity fairly consistently from the age of 17 to present. These might all be conditions of modern life: rates of allergies like hayfever and eczema in the UK population have risen to 44% in 2010, whilst rates of depression have similarly soared and are analysed later below.¹ Rising recorded levels of these ailments may signal a greater awareness and ability to self-diagnose these conditions, one could argue; but this alone doesn't sufficiently explain why anxiety disorders began rising first of all. My argument is that they are engrained in changing lifestyles and environments introduced by neoliberalism, a political project that began around forty years ago in the UK. Critical theory introduces the parameters of this problem. Anxiety and fear are no doubt psychological marks of domination in all social structures, but a specific anxiety and fear emerges in financial capitalism through the accelerating demands and pressures of working and living in the neoliberal era. This is facilitated by new information technologies such as the home PC, the internet, the hand-held network device, and finally the social networking sites, all of which enable and require the user to be continuously connected and up-to-date with information streams. Castells and Deleuze both converge in describing our culture as shifting from the 'actual' to the 'virtual', but the virtual itself only explains how culture is present in *digitised* information.² Digitisation itself is the fundamental shift of the contemporary era, as content

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is abstracted and transformed from analogue formats that allow works to retain their specificity, to encoded digital information (the film-reel, painting, book and piano nocturne are replaced and 'remastered' by the .mov, .jpeg, .pdf, .docx and .mp3).

Whilst Castells and others have observed the significant global increase of mobile phones and Internet access, an August 2011 Ofcom report finds that 47% of teenagers surveyed in the UK owned a smartphone, and of these, 60% felt 'addicted' (the report also notes a general decline in TV and reading activities at the expense of smartphone communications connectivity).³ The modern individual must work harder, longer, and with far more distraction in what Virilio calls a 'tele-present' world, where the immaterial workspace can be entered and work begun from anywhere in the world with telecommunications coverage.⁴ Consider the panic of losing a mobile phone at home now, or the leisure of not checking and responding to emails over a 24-hour period. Whilst digitised technologies have abstracted and placed many cultural forms on a single homogeneous platform, personal technologies have the worker connected and potentially labouring at all hours. The experience of labour is universalised: whilst this might have led to greater equality amongst workers and hence a stronger position for negotiating improved working and social rights, it has instead led to frozen wages and isolation in the workplace: why aren't you working at midnight on a Friday, or working overtime on your day-off? Where is your evidence of learning extra 'skills' during your weekends? John and Louise don't stop at *weekends*! Competition and rivalries among workers are deliberately fomented, workers are pushed to effectively and entrepreneurially manage their own human capital, as Ivor Southwood has so brilliantly analysed in his 2011 *Non-Stop Inertia*, whilst stress, depression and anxiety increase and depreciate the general experience of the contemporary era into one of depression, cynicism and anxiety.

Tim Berners-Lee, creator of fundamental Internet protocols like html and the World Wide Web, describes his vision of continuous connectivity – 'anything being potentially connected with anything' – where machines, information systems and bodies become fused into one organic-biopolitical network that 'brings the workings of society closer to the workings of our minds'.⁵ Libertarian visionaries of the Internet like

Berners-Lee all celebrate the potential for continuous connectivity to enable each of us to think better, create more, and engage in far more varied and inspiring social interactions across the world than ever before. But continuous connectivity imposes a new psychological requirement on the user to be ready and responsive to connection. The worker now experiences what Castells terms 'timeless time': biological time is negated by the choice to have children far later in life via IVF treatments; whilst social time, working-time or family time is negated by the flexible nature of working, which too can now be done at home, and at all hours.⁶ Knowledge and news depreciate at an increasing rate: new content is constantly demanded just-in-time, causing time itself to flatten. As economist Enzo Rullani puts it, 'All the actors of the knowledge economy are engaged in a *race against time*, where running is necessary simply to maintain the same position and not fall behind'.⁷

Time diminishes as the space of work, family, shopping, and social interaction interweave into one flattened, expanded universal space, now located on a screen or hand-held media device. This in itself is neither bad nor good, but its significance is that previously separate and safe compartmentalised spaces and activities have been encroached into by continuous connectivity, thereby increasing the amount of opportunities to work, buy, socialise, and so on, exponentially. The danger I identify is how this new opportunity will be colonised into further 'productiveness', and that these technologies have themselves been invented not with libertarian ideals in mind, but for military and industrial usage.

The experience of social space has shifted from tangible locations (clubs, bars, halls, and so on) to immaterial social networks; a shift to immateriality that reflects the declining funding, access, availability and use of public spaces, which have either closed or become enclosed by private security controls. As with the loss of specific times considered earlier, like family time or religious time, which could themselves be called 'public' times, the loss of public material spaces might not in itself be a bad thing. Can't civic discourses take place online? Yes, and often in stimulating public exchanges among strangers, but only to the advantage of those who can afford to possess the technologies to access the immaterial. Online social spaces have become some of

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the most heavily advertised and controlled areas, with a user's digitised information now the property of two or three huge internet giants. Each of us will still pass by town halls, use public transport and infrastructure, so rather than bask in neophilia, how can existing public spaces be understood in terms of anxiety and control? Richard Sennett documented the beginning of a trend of speed, anxiety and the shifting uses of public architecture back in 1974. For him, 'public space is an area to move through, not be in ... a derivative of movement'.⁸ The accelerated city unravels the public, as public spaces themselves are emptied of civic value and resold at commercial value. As a commodity, the value of space increases in its relative scarcity and its productivity. For Virilio too, the very spatiality of the city itself has unravelled via increased speeds of information access; no longer a 'space' in any sense, but a labyrinth of 'interfaces' and screens: 'the way one gains access to the city is no longer through a gate, an arch of triumph, but rather through an electronic audiencing system'.⁹ Work is intensified into continual timeless activity, debt is universal, and connectivity must be continuous. As Sennett argues:

When everyone has each other under surveillance, sociability decreases, silence being the only form of protection ... Human beings need to have some distance from intimate observation by others in order to feel sociable.¹⁰

Whilst critical theorists have detected a sea-change in the last forty years towards a greater instantaneity and precarity, the medical establishment has also transformed its understanding of rising anxiety. The *Diagnostic and Statistical Manual of Mental Disorders* (DSM) of the American Psychiatric Association has, since the Copernican arrival of *DSM III* in 1980, been considered the authoritative index of mental disorders, codified within its system of scientific management. Its most recent 2004 IV-TR edition describes 'Generalized Anxiety Disorder' as 'excessive anxiety and worry',

an uncontrollable worry that largely dominates the sufferer's time, and usually defined by three or more symptoms, including 'restlessness, being easily fatigued, difficulty concentrating, irritability, muscle tension, and disturbed sleep'.¹¹ These symptoms describe those of the precarious worker, exhausted, fed up, tired yet compelled to stay awake just to finish a little more work from home, a microwave-meal usually spilt over their laptop.

Depression and exhaustion are endemic and act as marks of an affective and immaterial economy where employment is now to be found in the services – retail, leisure, call-centres, cleaning, childcare, sex work – where an inflated mood, one indeed of motivation, is required. I can only smile for a certain amount of time before my jaw aches. Individuality becomes another part of the service worker's uniform. There's a raft of recent reports detailing increasing levels of depression and anxiety: a 2003 survey by the American Medical Association (AMA) found that 10% of 15-54 year olds surveyed in the US had had an episode of 'major depression' in the last 12 months, with 17% of these over the course of their lifetimes; a figure echoing the 15.1% found in the UK to be suffering from 'common mental disorders' (stress, anxiety and depression) by the NHS's most recent 2007 adult survey.¹² Furthermore women were found to be twice as likely to suffer from depression as men on average both in the AMA and NHS Surveys – the 15.1% average comes from 12.5% in men, 19.7% in women (the real unrecorded numbers are probably higher). The NHS Survey also found that self-harm and suicidal behaviours in women had increased since 2000, with 'being female' at one point listed by the survey as a source of depression, without irony or sociological comment. A final cold figure: one-fifth of all working days in Britain are estimated as lost due to anxiety and depression forcing workers to take time off, a very shaky estimate given the stigma and perceived weakness of openly telling managers of mental health problems; but given the current prospect

of increasing working hours in Britain as labour regulations are further 'liberalised', this anxiety will only continue.¹³

Given the general, non-personal causes of these common mental disorders (work stress, social isolation, inadequate housing, debt, alcohol and substance misuse), there is clear evidence beyond the obvious observations of one's surroundings that overall quality of life is declining during the neoliberal era, a decline that has affected men and women in different ways, with a high suicide rate amongst men on the one hand – suicide is the single biggest cause of death in men aged 15-34 in England and Wales – and a higher incidence of depression among women on the other.¹⁴ Recent employment statistics demonstrate that women have been adversely affected by the large redundancies within the public services in the UK following the neoliberal austerity cuts, with a March 2011 TUC report finding female unemployment had risen 0.5 points to its highest level since 1988.¹⁵ Single-parent families are largely led by females, who are struggling with reduced welfare support, inflation and reduced employment opportunities, all the while continually demonised by the right-wing media and Conservative governments as 'feckless' and irresponsible.¹⁶ Austerity becomes the 'state of exception' of British neoliberalism, with the need for deficit cuts being used both by Thatcher, Brown and now Cameron to further reduce welfare and support services whilst justifying wage freezes and unemployment, which adversely affect women.

Reports in April 2011 balefully announced that antidepressant prescriptions in the UK have risen by 43% over the past five years, with London health authorities alone spending £20million annually on anti-depressant medication.¹⁷ Although there are numerous problems with the reliability of statistics concerning actual depression amongst the population, the development and normalisation of psychopharmacological treatments is significant. Indeed reports in 2004 suggested that traces of Prozac had been discovered in London's water supply, perhaps the ultimate perfection of biopolitical management.¹⁸ Carl Walker draws attention to World Health Organisation predictions that by 2020 depressive disorders will be the leading cause of disability and disease burden across the globe. Walker finds a poor

material standard of living accounting for nearly 25% of cases of common mental disorder in 1998, a figure which, given increasing poverty, debt and social inequality will have risen.¹⁹

This evidence of anxiety and increasing connectivity points to what I term a new hysteria, as the body and mind mutiny against the impositions for productivity and potentiality laid upon it by neoliberal capitalism. Neoliberalism in turn evades responsibility for caring for the waste-products of labour (sickness, madness, debility in workers, soldiers, the elderly, the disabled) by privatising education facilities, prisons, factories, housing, hospitals and psychiatric hospitals, which have all fallen into stagnation and decline in the US and UK during the neoliberal era, only to be reanimated by private companies in a grotesque, economically profitable parody of their former operation. This could present a crisis of biopolitics given that the facilities for managing life are diminishing. Yet the semblance of increasingly productive operation remains: the university, workplace and medical advice are available at all hours: one can search online for a diagnosis and to purchase drugs, or call 111 or 112 for medical or police advice. The problem is when one actually needs hospital treatment or the assistance of a police officer.

Returning to the specific case of anxiety in psychiatry, the decline of the major psychiatric hospitals were only facilitated by the mass development of psychopharmacology, the treatment of psychiatric disorders through drug therapies. As a fledgling arena of research, a huge spate of publications on psychopharmacology began from the mid-1970s and appeared throughout the 1980s, during which the fairly universal treatment of psychological disorders by drugs was established. Psychopharmacology assumes that psychiatric disorders are malfunctions of neuronal chemistry which can, through the correct rational application of scientific intervention, be universally treated or managed. The onus is on both an infallible scientific method and the individual to conform and adhere to treatment. Disorders are therefore caused by the individual and their defective neurological chemistry, and not the circumstances or psychosocial conflicts around them, as psychoanalysis had previously contested. In such a manner, neoliberal control permeates the entire 'sick' body: the timetabled, site-specific and socially-mediated session

on the therapist's couch is replaced with the continuous intervention of chemicals. The individual is now free to challenge and overcome their problems, through a mixture of prescribed treatment and usually through the additional cognitive re-programming of more positive mindsets. Psychopharmacology demonstrates the entire workings of neoliberalism in one section of society through a curious hegemonic transformation: the postwar consensus of Keynesianism and social democracy, Fordism and psychoanalysis with it, are all marked by a social engagement with problems. This was a social politic, one that addressed and engaged with problems of deviance, health, upbringing, employment and poverty. Although it was in some ways a superficial consensus that sought to prevent the onset of Communism in Western Europe and the US, as critics like Graeber have pointed out, it was a politic that emphasised the benefit and use of society to manage life and treat problems.²⁰ The shift to post-Fordism, neoliberalism and psychopharmacology represents a shift to an economic politic, where disorder is managed by a mixture of mathematical-scientific reasoning, be it the market or the technological management of illness, where 'unproductive' industries are outsourced and labour abstracted. In such a setting, life is abstracted and valued only in its capacity to increase its productivity. As the earlier analysis of increasing smart-phone usage, common mental disorders and continuous connectivity pointed to, anxiety will inevitably increase as the contemporary experience of our era so long as each worker submits to this regime of productivity. Anxiety machines will inevitably break down.

Freud tells us in 'Beyond the Pleasure Principle' that whilst fear regards a specific object, anxiety is an indefinite state without object which seeks to alert us of an 'unknown' danger one is ignorant of and vulnerable to.²¹ Anxiety is the condition of the disempowered, and Freud later noted that it is only by becoming aware of the repressed fear-object (castration, fear of temptation, etc.) that one can overcome the anxious state.²² There is a contemporary master narrative of cynical complacency, perhaps known by middle-class tea-towel slogans like 'keep calm and carry on'. It belies an era of profound anxiety disorders in its machinic labour-parts. Continuous connectivity offers a branch of security: so long as we keep working, applying ourselves, operating rhythmically to the

drone of the contemporary master narrative, we will never plumb the depths of the unknown, anxiety. This is a productive mode for neoliberal capitalism: our managers and supervisors will never ask us to slow down, or work less.

Finding a personal solution like abstention, escapism, self-help, stamp collecting, football and other religions, video games, alcohol/drug excesses or burying one's own head in the sand keeps the focus on the marginalised and colonised individual. Each of us *could* stop working, but the prospect and poverty of this appals us and renders anything else except passive opposition very difficult. Individually, one is condemned to act out one's discontent in panic attacks, cynicism, neurosis, self-harm and other phenomena of the new hysteria. Although many workers are well aware of what it is that causes their anxiety and debt in the short-term, perhaps the time comes now for a collective therapeutic catharsis and overturning, turning anew. A continuously connected labour now has the potential to refuse to honour its debts, precarious contracts, and obligations to law, just as neoliberal capitalism has refused to. Perhaps the final hysteria might occur in the collapse of the connective networks in an unparalleled series of violent mass eruptions, as the possibility of a safe, healthy and viable future becomes less and less likely. What might anxiety and hysteria finally look like, on a collective scale?

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NOTES

1. Amelia Hill, 'Scientists produce postcode map of geographical links to allergies', *The Guardian*, 7 February 2011.
2. Manuel Castells, *The Rise of the Network Society*. (Second Edition). Volume I of *The Information Age trilogy*, Chichester: Wiley-Blackwell, 2010, pp.403-406; Gilles Deleuze and Félix Guattari, *Anti-Oedipus. Capitalism and Schizophrenia*, trans. Robert Hurley, Mark Seem and Helen R. Lane, Minneapolis: University of Minnesota Press, 2000, pp.249-255.
3. Ofcom, *Communications Market Report: UK. 4 August 2011*.
4. Paul Virilio, *The Information Bomb*, trans. Chris Turner, London: Verso, 2005, p.13.
5. Tim Berners-Lee, *Weaving the Web*, New York: HarperCollins, 1999, pp.1-2.
6. Castells, *Rise of the Network Society*, pp.495-499.
7. In Matteo Pasquinelli, *Animal Spirits: A Bestiary of the Commons*, Rotterdam: NAi Publishers, 2008, p.98.
8. Richard Sennett, *The Fall of Public Man*, Cambridge: Cambridge University Press, 1977, p.14.
9. Virilio, 'The Overexposed City', from *L'espace Critique*, trans. Astrid Hustvedt, New York: Urzone, 1986, p.543.
10. Sennett, *Fall of Public Man*, p.15.
11. American Psychiatric Association, *The Diagnostic and Statistical Manual of Mental Disorders IV. Text Revision. DSM-IV-TR*, Arlington: American Psychiatric Association, 2004, p.472.
12. NHS Information Centre, *Adult Psychiatric Morbidity in England, 2007. Results of a Household Survey*, Leeds: NHS Information Centre, 2009, pp.11-13, 27; Carl Walker, *Depression and Globalization: The Politics of Mental Health in the Twenty-First Century*, New York: Springer, 2008, p.8.
13. NHS Information Centre, *Adult Psychiatric Morbidity 2007*, p.27.
14. Office for National Statistics. Deaths Registrations Data, Deaths by specified cause in England and Wales, 2010. Data requested.
15. Chartered Institute of Personnel and Development, *Overview of CIPD Surveys: A Barometer of HR trends and developments in 2011*.
16. See as indicative James Groves, 'David Cameron warns feckless parents who expect to raise children on benefits', *Daily Mail*, 14 June 2011.
17. NHS London, 'Primary Care Spend on Antidepressant Drugs', <http://data.gov.uk/dataset/london-nhs-primary-care-spend-antidepressant-drugs> [URL accessed 03/03/12].
18. Mark Townsend, 'Stay calm everyone, there's Prozac in the drinking water', *The Observer*, 8 August 2004.
19. Walker, *Depression and Globalization*, pp.21-22.
20. David Graeber, *Debt: The First 5,000 Years*, New York: Melville House, 2011, pp.373-376.
21. Sigmund Freud, *Beyond the Pleasure Principle and Other Writings*, trans. John Reddick, London: Penguin, 2003, pp.50-51.
22. Freud, *Beyond the Pleasure Principle*, pp.172-177, 233-277.

